

STATE OF NEBRASKA

DEPARTMENT OF AGRICULTURE

P.O. BOX 94668

LINCOLN, NE 68509

APPLICATION FOR POTATO SHIPPER'S LICENSE

Name of firm:

Individual Partnership Corporation

Federal identification number/social security number:

Name of principal executive officer:

Address of principal office:

Cities, towns, or loading points from where potatoes will be sold and/or shipped:

Are you purchasing an established business?

If so, give name and address of former owner and date of transfer:

STATE OF _____)
) ss.
COUNTY OF _____)

The undersigned, being duly sworn, affirms that the above statements are true and correct.

Firm: _____

By: _____

Subscribed in my presence and sworn to before me this ____ day of _____, 20____.

Notary Public